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PTO/SB/21 (08-06)

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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages In This Submission

13

Application Number	10/804,495
Filing Date	March 18, 2004
First Named Inventor	Donald R. Titterington
Art Unit	1711
Examiner Name	R. Sargent
Attorney Docket Number	D/A09081D

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Remarks Customer No. 021567  The Commissioner is hereby authorized to charge any fees under 37 C.F.R. 1.16 and 1.17 which may be required by this paper to Deposit Account No. 24-0037.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Wells St. John P.S.	
Signature		
Printed name	James E. Lake	
Date	20 Dec 2006	Reg. No. 44,854

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Faxed to (571)273-8300

Typed or printed name

James E. Lake

Date

20 Dec 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DEC 20 2006

PTO/SB/17 (07-06)

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<b>Effective on 12/03/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4919).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2006</b>		<b>Complete If Known</b>	
		Application Number	10/804,495
		Filing Date	March 18, 2004
		First Named Inventor	Donald R. Titterington
		Examiner Name	R. Sergeant
		Art Unit	1711
		Attorney Docket No.	D/A0306IID
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>130.00</b>			

**METHOD OF PAYMENT** (check all that apply)
 Check     Credit Card     Money Order     None     Other (please identify): \_\_\_\_\_

 Deposit Account    Deposit Account Number: 24-0037    Deposit Account Name: Xerox Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Charge fee(s) indicated below  | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

**Small Entity****Fee (\$)**

50      25

Each independent claim over 3 (including Reissues)

200      100

Multiple dependent claims

360      180

Total Claims	Extn Claims	Fee (\$)	Fee Paid (\$)	Small Entity	Fee (\$)	Fee Paid (\$)
- 20 or HP =	II	= 0		Fee (\$)	Fee (\$)	

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extn Claims	Fee (\$)	Fee Paid (\$)	Small Entity	Fee (\$)	Fee Paid (\$)
- 3 or HP =	II	= 0		Fee (\$)	Fee (\$)	

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100	/ 50	(round up to a whole number) x	0	0

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Fee Paid (\$)

0

Other (e.g., late filing surcharge): Terminal Disclaimer

Fee Paid (\$)

130

**SUPERVISOR BY**

Signature		Registration No. 44,854 (Attorney/Agent)	Telephone (509) 824-4276
Name (Print/Type)	James E. Lake		Date 20 Dec 2006

This collection of information is required by 37 CFR 1.130. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DEC 20 2006

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application Serial No. .... 10/804,495  
Filing Date ..... March 18, 2004  
Inventor ..... Donald R. Titterington  
Assignee ..... Xerox Corporation  
Group Art Unit ..... 1711  
Examiner ..... R. Sergent  
Attorney's Docket No. .... D/A0306IID  
Title: Phase Change Ink Formulation Containing a Combination of a Urethane Resin, a Mixed Urethane/Urearesin, a Mono-Amide and a Polyethylene Wax

**RESPONSE TO SEPTEMBER 28, 2006 OFFICE ACTION**

To: Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

From: James E. Lake (Tel. 509-624-4276; Fax 509-838-3424)  
Wells St. John P.S.  
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Spokane, WA 99201-3828

**AMENDMENTS**

12/21/2006 NNGUYEN1 00000116 240037 10804495  
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